PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

appropriate. All further indicated unless correcte maintenance fee notificate	correspondence including the delow or directed other cities.	g the Patent, advance of erwise in Block 1, by (a	TE FEE and PUBLICATION of many corresponding a new corresponding to the	oondence address; and/or	(b) indicating a separa	ite "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
DALLAS OFF 2200 ROSS AVI SUITE 2800		²⁰⁰⁶ GHT & JAWORSI	KI L.L.P. I her	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
DALLAS, TX 75201-2784				(Depositor's name)			
				(Signature)			
	-					(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/099,875	03/15/2002		. Qian Yu	51519-	P001US-10203244	5395	
TITLE OF INVENTION: MONITORING AND IN-LINE COMPENSATION OF POLARIZATION DEPENDENT LOSS FOR LIGHTWAVE SYSTEMS							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	\$0	\$0 I	\$700	03/12/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS	٠.			
LEE, DAVID J 2613 398-152000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list							
CFR 1.363). Change of corresp Address form PTO/SJ "Fee Address" ind PTO/SB/47; Rev 03-(Number is required.	ondence address (or Cha B/122) attached. lication (or "Fee Address)2 or more recent) attach	nge of Correspondence "Indication form led. Use of a Customer	or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attorney on a listed, no name will be	the name of a single firm (having as a member a stered attorney or agent) and the names of up to existered patent attorneys or agents. If no name is a l, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
• •	outhern California (L	A)	Los Angeles, (Los Angeles, CA			
Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government							
	are submitted: No small entity discount # of Copies	permitted)	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number				
5. Change in Entity Status (from status indicated above) \[\sum_{a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \] b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee an	as SMALL ENTITY state and Publication Fee (if requested of the United Sta	uired) will not be accepte	d from anyone other than to Office.	he applicant; a registered	attorney or agent; or the	assignee or other party in	
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date March 9, 2007							
Typed or printed name Thomas Kelton				Registration No.			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							